



ALEXANDRA MIDDLETON

NATUROPATHIC NUTRITIONIST

PATIENT MOTIVATION PROFILE – FEMALE

Date 23/08/2022
Name Maria Romanin D.O.B 25/06/1998
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Occupation (current &/or previous) Student
Who do you live with? My parents (Mum Grace and Dad Laurie)
Referred by _____

Other specialists being seen

(e.g. GP, gynaecologist, endocrinologist, natural therapist, Chinese herbalist, etc – please list names and contact details)

Gynaecologist/surgeon - Last seen in Jan 2022

Current health goals and/or concerns

1. Endometriosis symptoms - They are currently at an unmanageable level, to the point where I am afraid to leave my house.
2. Digestive issues
3. Low energy/chronic fatigue

Please list any other pre-diagnosed health conditions

Endometriosis



Current allergies (food, environmental, medication, etc)

Medication - Maxalon (causes shakes, convulsions)

Current diet (please list food you regularly eat/ foods you avoid/ foods you do not like or react to; how much water you drink and if it is filtered or tap)

I love vegetables and eat them regularly. My diet is quite limited at the moment due to my symptoms and lack of hunger. I have recently been avoiding gluten. I avoid beans/legumes as they cause severe pain. I can't eat rice (white or brown) as they also cause symptoms and sweet potato makes me feel nauseous. I currently drink around 1 - 1.5L of water and it is a combination of tap and bottled.

Please list any medications and/or supplements you are currently taking, including the reason for taking them, brand names and quantities/ dosages

I don't take medications every single day but I currently have these prescribed to me:

Ondansetron 8mg - For severe nausea. I normally experience nausea during an episode/flare up and during ovulation + my period and I take the ondansetron when it gets severe.

Endone 5mg - for severe pain (I try not to take this if I can, as it makes me feel extremely sick and anxious

Naprogesic - For period pain and I do take this every single month during my period to help ease cramps.

Primolut - For severe bleeding and I have only ever taken it a few times as it messes with my cycle.

HEALTH HISTORY

FAMILY HEALTH HISTORY

Please list your family health history below, citing the condition and relevant family member (please note also if they died from the illness)

Mum - Breast cancer in 2011. Underwent surgery and radiotherapy

Dad - Ulcerative colitis. Diagnosed in 2018 and is currently on medication to control symptoms

Maternal grandmother - Rheumatoid arthritis. Maternal grandfather - Type II diabetes

Paternal grandmother - Died of Lung cancer in 2008. Paternal grandfather - Died of heart failure in 2021

Please chronologically list your health history timeline from birth to now, citing the approximate date, condition/diagnosis and treatment (including surgeries if applicable)

E.g. 2001 Hypothyroidism - prescribed thyroxine 30mg/daily which I continue to take;

E.g. 2012 Endometriosis - laparoscopy, no treatment post-surgery.

2011 - 2016 - Suffered many health issues. Recurring infections, sinus infections, chest infections, colds stomach aches, rib pain, heavy painful periods (flooding began when I was 15 years old.

2017 - Suffered glandular fever and shingles all over my abdomen. Still experienced stomach and period issues but was dismissed by nearly 9 doctors, despite going to the emergency room nearly 10 times in that year.

2020 (May 27th) - First Laparoscopy, diagnosed with stage 3 almost 4 endometriosis and was told I would need a second surgery. My post-op experience was rough and I developed a severe belly button infection and required antibiotics.

2020 (July 14th) - Second Laparoscopy + excision

2021 (October 29th) - Major surgery (Laparoscopy no.3), had my right ovary removed due to the severity of the disease. Post-op recovery was extremely traumatic and rough. I developed many health issues and symptoms after my ovary was removed. Was dismissed by gynaecologist and GP regarding post op symptoms.

GENERAL HEALTH

Please put a 'Y' in the box if you current suffer from any of the following

Please put a 'X' in the box if you have experienced this problem in the past

GASTROINTESTINAL		RESPIRATORY		ENDOCRINE	
Constipation	X	Shortness of breath	Y	Hyperthyroidism	
Diarrhea	Y	Asthma		Hypothyroidism	
Bloating	Y	Regular cough		Adrenal dysfunction	
Flatulence	Y	Sinus/nasal congestion		Diabetes I	
Indigestion	Y	Post-nasal drip		Diabetes II	
Acid reflux/ heartburn	Y	Hay fever		Weight loss	X
Worms/parasites		Allergies		Weight gain	Y
SIBO					
Polyps		NERVOUS		HAEMATOLOGY	
Bad breath		Adrenal fatigue		Anemia (Iron)	
Mucous in stool	X	Chronic fatigue	Y	Anemia (B12)	
Blood in stool	Y	Poor memory		Haemochromatosis	
Food in stool		Poor concentration	Y	Easily bruised	Y
Itchy anus		Brain fog	Y	Frequent nose bleeds	
Laxative use		ADD/ ADHD			
Haemmoroids	Y	Learning difficulties		URINARY/ KIDNEY	
		Pins/needles		Kidney infection	
CARDIOVASCULAR		Headaches		Kidney pain	
High blood pressure		Migraines		Frequent urination	Y
Low blood pressure		Tinnitus	Y	Dark urine	
Metabolic syndrome				White froth in urine	
High cholesterol		IMMUNE		Get up for toilet during the night	
Heart attack		Frequent colds/ flu/virus	X	Urinary Tract infection (UTI)	X
Heart murmur		EBV/ Glandular fever	X	Cystitis	
Angina		Autoimmunity		Incontinence	
Arrhythmia	Y	Cancer		Extreme thirst	Y
Poor circulation	Y	HIV			
Cold feet	Y	Thrush/candida		LIVER/ GALLBLADDER	
Cold hands	Y	Swollen glands	Y	Hepatitis	
Dizziness		Cold sores		Fatty liver disease	
Varicose veins	Y	Styes		Issue digesting fat	
				Sticky/mushy stool	Y
HAIR		NAILS		Gallbladder removal	
Increased loss		Brittle		Poor alcohol tolerance	
Poor quality		Vertical ridges		Weight gain	Y
Oily		Split easily			
Dry		Soft			
Dandruff					

SKIN		FEMALE REPRO		TRAUMA	
Dry	Y	Abnormal pap smear		Physical abuse	
Oily		Adenomyosis		Sexual abuse	
Rough		Amenorrhea (absent period)		Verbal abuse	
Itching		Anovulation		Broken bones	
Acne	Y	Break thru bleeding		Head trauma	
Psoriasis		Breast lumps (benign)	Y	Accidents	
Eczema		Contraceptive Pill	X	Divorce	
Dermatitis		Cystitis		Death of loved one	X
Offensive odour		Ectopic pregnancy		Bankruptcy	
Poor wound healing		Endometriosis	Y	Natural Disaster	
		Fallopian tube issues		Other	
SLEEP QUALITY		Fibroids			
Issues falling asleep		Flooding	Y	EMOTIONS	
Issues staying asleep	Y	Genital Herpes		Depression	
Vivid dreams		Genital Ulcers		Anxiety	Y
Nightmares		Genital warts/ HPV		Panic attacks	Y
Snoring	Y	Genito-urinary infections		Mood swings	Y
Sweating	Y	Gynecological cancer		Irritability	
Wake up hungry		Infertility		Chronic stress	Y
Wake up tired	Y	Irregular periods		Anger	
		IUD/Mirena	X	Cranky skipping meals	
ENERGY		Low libido	Y	Looping/ OCD	
Good energy		Malformed womb		Phobias	Y
Poor energy	Y	Miscarriage			
Need caffeine regularly		Ovarian Cysts	X	TOXIN EXPOSURE	
Energised at night		Ovulation pain	Y	Cigarettes	
Post exercise fatigue		Pain on intercourse	Y	e-Cigarettes	
Malaise	Y	Painful periods	Y	Passive smoke	Y
		PCOS		Damp in home/work	
MUSCULOSKELETAL		Pelvic Inflammatory disease (PID)		Recreational drugs	
Cramps	Y	PMS	Y	Alcohol	
Pins/needles		Smelly discharge		Chlorine pools	
Injury		Tender breasts	Y	Garden pesticides	
Arthritis		Vaginal burning/irritation		Fluoridated toothpaste	Y
Osteoporosis/Osteopenia		Vaginal thrush		Tap water	Y
Disc issues		Vaginitis		Non-organic meat	Y
Back pain	Y			Processed/deli meats	Y
Shoulder/neck pain	Y			Antibiotics	X
Joint pain/ stiffness	Y			Amalgam fillings	
				Non-organic skin care	Y
				Non-organic make up	Y
				Mainstream deodorants	Y
				Regular vaccinations	Y
				Glues/fume/chemical/ gas exposure at work	

